DECLARATI	ON AND	Attor	ney Docket Number	21377Y						
POWER OF ATTORNEY FOR UTILITY OR DESIGN			Named Inventor	Mark T. Bilodeau						
PATENT APPL	ICATION		CO	MPLETE IF KNOWN						
(37 CFR 1.	63)	Appli	cation Number							
Declaration Submitted with Initial Filing OR	Declaration Submitted after Initia		g Date							
	Filing (surcharge (37 CFR 1.16 (e)) required)	1	p Art Unit							
	required)	Exam	iner Name							
As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
	INHIBITORS OF AKT ACTIVITY									
the specification of which		(	Title of the Invention)							
bears the Attorney Docket Number and Title of the Invention noted above										
OR is attached hereto										
OR										
was filed on (MM/DD/				plication Number or PCT Internatio						
Application Number and was amended on (MM/DD/YYYY) (if applicable).										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
I hereby claim foreign priority	y benefits under 35 U.	S.C. 119	(a)-(d) or (f) or 365(b) or	of any foreign application(s) for pate	ent or inventor's					
				st one country other than the Uniteding ign application for patent or inventor						
				ation on which priority is claimed.	or s certificate(s),					
Prior Foreign Application Number(s)	rior Foreign Application			Attorney Docket Number	Priority Claimed? YES NO					
-	·									
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
Application Num		Filing Date (MM/DD/YYYY)	Attorney Docket Number							
60/465,123	04/24/20		21377PV							
*										

## DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

designating is not disclosed 35 U.S.C. 13	m the benefit under the United States of sed in the prior Unit 12, I acknowledge the which became available.	America, listed States or de duty to di	sted below PCT inter sclose info	and, instructional ormation	ofar as the application known to	subjon in to me to	ect matter of the manner to be materi	of each of provided al to pate	f the cl by the ntabili	aims of first pa ty as de	this application aragraph of fined in	
	U.S. Parent Application Application No		t			Parent Filing Date			Parent Patent Number (if applicable)			
	Application (Ve	<u> </u>		1	_(1711)	(MM/DD/YYYY)			(y apparature)			
						-						
		_								·		
Addition	al U.S. or PCT intern	ational applic	ation numb	ers are lis	ted on a su	pplem	ental priorit	y data shee	t PTO/	SB/02B	attached hereto.	
As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:  Customer Number  OR  X Registered practitioner(s) name/registration number listed below												
	Name	Registered pr	Regist	ration	gistiation i	Idilloci		me			Registration	
Matthew A. Le		50	Nun 0,149	ber							Number	
David A. Muth	ard	<del>-</del>	5,297									
Mark R. Daniel	<del>.</del>		,913		_							
	31,715											
Direct all co	rrespondence to: X	Customer	r Number	00	0210							
Name	Matthew A. Leff											
Address	Merck & Co., Inc Patent Department											
Address	P.O. Box 2000, R	Y60-30										
City	Rahway		,		State	State NJ		ZIP		07065-0907		
Country	USA	SA Telephone			(732)594-	2)594-1404 Fax			(732)594-4720			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of Sole or First Inventor:  A petition has been filed for this unsigned inventor												
Given Name (first and middle [if any]) Family Name or Surname								me				
Mark T. Bilodeau  Inventor's												
Signature	Martit. Bilode					D			ate 13 MAR 2004			
Residence: City	Lansdale	Lansdale State PA					Country USA			Citizenship USA		
Post Office Address	Merck & C	o., Inc., P.C	D. Box 200	00								
City	Rahway				Sta	te	NJ	ZIP		07065	5-0907	
Additional inventors are being named on the 1 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.												

## **DECLARATION AND POWER OF ATTORNEY**

## ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])					Family Name or Surname							
Zhicai					V	Wu						
Inventor's Signature	Zhien'ulu								Date	19-M	r-ruef	
Residence: City	Quakertown		State	PA		Country US		USA		Citizenship	China	
Post Office Address		Merck & Co., Inc., P.O. Box 2000										
City Rahway				State NJ				ZIP	07065-0907	,		
Name of Addition	al Jo	oint Inventor, if any:			A petition has been filed for this unsigned inventor							
Give	n Na	me (first and middle [if	any])					F	amily Na	ame or Surnan	ne	
Inventor's Signature									Date			
Residence: City			State			Country				Citizenship		
Post Office Address	Merck & Co., Inc., P.O. Box 2000											
City	Rahway			_		tate NJ			ZIP	07065-0907	07065-0907	
Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor									
Given Name (first and middle [if			any]) Family Name or Su						ime or Surnan	ne		
Inventor's Signature						Date						
Residence: City			State			Country				Citizenship		
Post Office Address	Merck & Co., Inc., P.O. Box 2000											
City	Rahway			Sta		ate NJ		ZIP	07065-0907			
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					4	Family Name or Surname					ne	
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Inventor's Signature		*				Date			Date			
Residence: City			State	ate		Country			Citizenship			
Post Office Address		Merck & Co., Inc., P.O. Box 2000										
City Rahway		S		Sta	tate NJ		ZIP	07065-0907				